

FILED

2023 JAN 17 PM 12:03

CLERK

U.S. DISTRICT COURT

**UNITED STATES DISTRICT COURT**  
for the

District of

Case: 2:23-cv-00037

Assigned To : Jenkins, Bruce S.

Assign. Date : 1/17/2023

Description: Kamp v. Dehlin et al

Division Case No.

(to be filled in by the Clerk's Office)

Jennifer Ruth Kamp*Plaintiff(s)*

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

**-v-**Jury Trial: (check one)  Yes  No  
  
XJohn Dehlin, Clint Martin & Keri Witbeck*Defendant(s)*

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

**COMPLAINT FOR A CIVIL CASE****I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Jennifer Kamp</u>
Street Address	<u>2246 W Surrey Road</u>
City and County	<u>Taylorsville, Salt Lake County</u>
State and Zip Code	<u>Utah, 84129</u>
Telephone Number	<u>801-580-0566</u>
E-mail Address	<u>jenniferruthkamp@gmail.com</u>

**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (*if known*). Attach additional pages if needed.

## Defendant No. 1

Name	John Dehlin
Job or Title ( <i>if known</i> )	Registered Agent of Open Stories Foundation
Street Address	1828 Gundersen Lane
City and County	Salt Lake City, Salt Lake County
State and Zip Code	Utah 84124
Telephone Number	435-881-5809
E-mail Address ( <i>if known</i> )	johndehlin@gmail.com

## Defendant No. 2

Name	Clint Martin
Job or Title ( <i>if known</i> )	Open Stories Foundation Board Member
Street Address	
City and County	
State and Zip Code	
Telephone Number	801-372-1713
E-mail Address ( <i>if known</i> )	4kcars@gmail.com

## Defendant No. 3

Name	Keri Witbeck
Job or Title ( <i>if known</i> )	
Street Address	
City and County	
State and Zip Code	
Telephone Number	435-232-9876
E-mail Address ( <i>if known</i> )	kwitbeck@controlbyweb.com

## Defendant No. 4

Name	
Job or Title ( <i>if known</i> )	
Street Address	

City and County	<hr/>
State and Zip Code	<hr/>
Telephone Number	<hr/>
E-mail Address ( <i>if known</i> )	<hr/>

**II. Basis for Jurisdiction**

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (*check all that apply*)

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Federal question | <input type="checkbox"/> Diversity of citizenship |
| <input type="checkbox"/>                             |   |

Fill out the paragraphs in this section that apply to this case.

**A. If the Basis for Jurisdiction Is a Federal Question**

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

**41 u.s. code § 6503 Breach or violation of required contract terms.**

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**B. If the Basis for Jurisdiction Is Diversity of Citizenship**

## 1. The Plaintiff(s)

## a. If the plaintiff is an individual

The plaintiff, (*name*) Jennifer Kamp, is a citizen of the  
State of (*name*) Utah.

## b. If the plaintiff is a corporation

The plaintiff, (*name*), is incorporated  
under the laws of the State of (*name*),  
and has its principal place of business in the State of (*name*)  
\_\_\_\_\_.

*(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)*

2. **The Defendant(s)**

- a. If the defendant is an individual

The defendant, *(name)* John Dehlin, is a citizen of  
the State of *(name)* Utah. Or is a citizen of  
*(foreign nation)* \_\_\_\_\_.

- b. If the defendant is a corporation

The defendant, *(name)* \_\_\_\_\_, is incorporated under  
the laws of the State of *(name)* \_\_\_\_\_, and has its  
principal place of business in the State of *(name)* \_\_\_\_\_.  
Or is incorporated under the laws of *(foreign nation)* \_\_\_\_\_,  
and has its principal place of business in *(name)* \_\_\_\_\_.

*(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)*

3. **The Amount in Controversy**

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because *(explain)*:

\$254,430.00

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**III. Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

Please see attached, thank you.

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**IV. Relief**

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Intentional harm: \$100,000.00, Sexual Harassment: \$50,000.00, Discrimination of Pay: \$19,360.00, Unpaid Work Hours: \$16,070.00, Retaliation/Wrongful Termination: \$49,000.00, Defamation/Slander: \$20,000.00  
Total: \$254,430.00

\*See attached for further breakdown

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**V. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 1/17/2023

Signature of Plaintiff Jennifer Ruth Kamp

Printed Name of Plaintiff Jennifer Ruth Kamp

**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney \_\_\_\_\_

Printed Name of Attorney \_\_\_\_\_

Bar Number \_\_\_\_\_

Name of Law Firm \_\_\_\_\_

Street Address \_\_\_\_\_

State and Zip Code \_\_\_\_\_

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

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Telephone Number

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E-mail Address

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